

A Strategic Plan for the Texas EMS/Trauma System

Draft - 7/19/02

COVER LETTER (from GETAC)

EXECUTIVE SUMMARY (Will be written last)

INTRODUCTION (Kathy/Ed)

Charge - In 2001, the Texas legislature passed HB-2446 regarding Emergency Medical Services. Section 2 mandated GETAC to “assess the need for emergency medical services in the rural areas of the state” and to “develop a strategic plan for refining the educational requirements for certification and maintaining certification as emergency medical services personnel and developing emergency medical services and trauma care systems” full text may be viewed at <http://www.capitol.state.tx.us/tlo/billnbr.htm>).

Process - GETAC took this responsibility very seriously. A plan of action was developed by 9/1/01. Surveys, developed by the GETAC Rural Task Force, were sent to all EMS Providers, EMS Medical Directors, First Responder Organizations, and Hospitals (see Appendix for summaries of the survey results). Phenomenal response of

Open comment periods at all GETAC meetings following the session. Public Hearings were held in 6 areas of the state: Amarillo, Corpus Christi, El Paso, Harlingen, Nacogdoches, and San Angelo (see Appendix for a summary of the public hearings). The summary documents from the surveys and hearings were publicly posted for review and comment.

GETAC held multiple strategic planning sessions that were open to the public.

It was decided to broaden the focus beyond just rural areas because EMS and trauma systems are facing difficulties across the state. It was decided to utilize the EMS Agenda for the future model which divided EMS and trauma systems into 14 major goal areas. Some of these areas will be left for future planning.

Anatomy of an emergency medical situation (Ed Racht?)

What are Systems and why are they important? (Kathy/Steve)

WHERE WE ARE, WHERE WE WANT TO BE, HOW WILL WE GET THERE (use information from Lee Sweeten’s document)

Vision:

A unified, comprehensive, and effective EMS and Trauma System for a healthy, safe Texas.

Mission:

Draft 1 (Bureau staff to work on Draft 2 for GETAC's review): To develop a sustainable EMS and Trauma system for all patients

Goals:

Integration (John Simms) (insert description from Lee Sweeten's document)

Objectives (by 2010):

Increase involvement of EMS in community health activities.

Be cognizant of and incorporate health systems within EMS that address all segments of the population.

Integrate EMS and trauma services within health care systems and providers' networks, public health, and public safety to deliver quality care.

Develop cooperative ventures between communications centers and health providers to integrate communications processes and enable rapid patient-related information exchange.

Aggressively encourage increased coordination between EMS/trauma system entities among each other and with local/regional public health agencies.

Achieve universal EMS and hospital participation in the EMS/ trauma system.

Assure that health care payment policies do not adversely affect emergency/trauma patient care.

How-tos (strategies)

TDH BEM will complete the EMD Resource Center pilot, evaluate the results, and develop recommendations by May 2004.

All hospitals and EMS providers that care for emergency/trauma patients will participate in the EMS/trauma system (includes at a minimum: submission of the essential data set, system and individual entity quality improvement activities, and public education) as a requirement of licensure by *date*

Who will educate all health care payors who reimburse for emergency/trauma care in Texas about the EMS/trauma system by *date*

GETAC will develop universal definitions regarding the categorization of emergency/trauma patients for use statewide by *date*

Clinical Care (Ronnie Stewart) (insert description from Lee Sweeten's document)

Objectives (by 2010):

As an essential service, commit to a common standard of what constitutes baseline community emergency and trauma care services for all patient populations.

Apply evidence-based methodology to all EMS and trauma patient care.

Reduce time from injury to definitive care.

Achieve hospital resources to minimize hospital diversion to EMS traffic.

How-tos (strategies)

GETAC, TDH, EMS, hospitals, and stakeholder groups will appropriately educate state, regional, and local decision-makers regarding EMS and trauma systems beginning immediately and in an ongoing manner.

Communication Systems (Raymond Holloway) (insert description from Lee Sweeten's document)

Objectives (by 2010):

Implement enhanced "911" service statewide and ensure that all calls are routed to the appropriate PSAP regardless of call origin.

Develop and commit to a common standard of what constitutes baseline EMS dispatching protocol.

Explore and implement real-time patient data transfer and telemedicine where appropriate.

Establish robust fault tolerant communication systems in and between hospitals and EMS for MCI.

Achieve universal addressing and E911 system identification of all Texas domiciles.

Achieve E911 system identification, including GIS positioning for all cell phone 911 callers.

How-tos (strategies)

GETAC will meet with the 911 Commission to discuss the current status of the statewide 911 system, including cell phone positioning and addressing and to develop joint strategies to meet the above goal by ***date***

With stakeholder involvement, GETAC will develop a baseline state EMS dispatching protocol by ***date***

Public Access (PattiLou Dawkins) (insert description from Lee Sweeten's document)

Objectives (by 2010):

Provide access to emergency telephone service for those who cannot otherwise afford routine telephone service.

Enhance the ability of EMS systems statewide to appropriately triage and prioritize calls and allocate resources, providing appropriate pre-arrival instructions that are tailored to patients' needs.

Achieve universal access for emergency health care in Texas, including appropriate health care during MCI or disaster situations.

How-tos (strategies)

Who will encourage/develop recycling programs for decommissioned cell phones for free 911 access by **date**

Public Education (Joan Shook) (insert description from Lee Sweeten's document)

Objectives (by 2010):

Promote public education as a critical activity for EMS and trauma care systems.

Collaborate with community resources and agencies to determine and promote public education needs.
Public education should be accessible to the appropriate audience.

Explore new techniques and technologies for providing public education.

The next generation will be much more cognizant of EMS/trauma systems, including the appropriate use of these resources.

How-tos (strategies)

Who will develop multi-media templates for use statewide to educate the public as consumers of emergency/trauma care by **date**

Hospitals and EMS providers will develop partnerships with schools to implement targeted education programs by **date**

Who will encourage EMS providers to use ambulance ride-alongs in an appropriately monitored environment with requisite consent by **date**.

GETAC will increase consumer participation in its activities by **date**

GETAC, TDH, EMS, and hospitals will promote the continued implementation of AEDs, including requisite staff education, in all public places by **date**

Prevention (Mario Segura) (insert description from Lee Sweeten's document)

Objectives (by 2010):

Support and participate in evidence-based successful community injury or disease prevention programs (i.e. Safe Communities/Safe Nation).

Advocate for policy that promotes preventing injury and illness.

Include the principles of prevention and its role in improving community health as part of education core curriculum.

Reduce occupational related injuries in emergency health care professionals.

Increase the ability of emergency health care providers to recognize and document potential precipitating factors for injury.

Establish routine and timely surveillance of major injury and illness in Texas.

How-tos (strategies)

Human Resources (Rebecca Salido) (insert description from Lee Sweeten's document)

Objectives (by 2010):

Adequate, trained emergency and trauma care workforce

How-tos (strategies)

Who will encourage communities to implement innovative incentives (retirement benefits, insurance benefits, tax abatement, education, continuing education) for volunteer and career emergency and trauma care professionals recruitment and retention by **date**

EMS providers and hospitals will implement appropriate measures for personal protection and safety, including exposure management, infection control, and immunizations by **date**

EMS providers and hospitals will assure that critical incident stress management programs are available to all emergency and trauma care providers by **date**

Who will encourage market-based competitive wages for EMS personnel by **date**

Who will develop/implement pilot programs to integrate EMS into other health agencies by **date**

TDH BEM will implement a webpage for scholarships/funding availability and vacancies by **date**

Medical Oversight (Ed Racht) (insert description from Lee Sweeten's document)

Objectives (by 2010):

Appropriate sufficient resources for EMS medical oversight.

Require appropriate credentials for all those who provide medical oversight.

Develop an EMS physician training curriculum and develop certification.

Explore initiatives to address medical oversight liability issues.

Develop collaborative relationships between EMS systems and academic institutions.

How-tos (strategies)

Education Systems (Maxie Bishop) (insert description from Lee Sweeten's document)

Objectives (by 2010):

To create, implement, and maintain an effective EMS education system that addresses the needs of primary and continuing education for all levels of EMS providers.

Develop and implement innovative methods to increase access to EMS, nurse and physician initial and continuing education.

Develop collaborative relationships between EMS systems and academic institutions.

Health care providers will ensure that alterations in expectations of EMS personnel to provide health care services are preceded by adequate preparation.

How-tos (strategies)

GETAC will review and make recommendations regarding the EMT-Intermediate level by *date*

EMS providers will receive all calls for EMS using personnel with the requisite combination of education, experience, and resources to optimally query the caller, make determination of the most appropriate resources to be mobilized, and implement an effective course of action by *date*

Texas will adopt the principles of the National EMS Education and Practice Blueprint by *date*

Research (Fred Hagedorn) (insert description from Lee Sweeten's document)

Objectives (by 2010):

Enhance the quality and quantity of published EMS research.

Develop partnerships with academic institutions with long-term commitments to EMS research.

Subject EMS and trauma clinical care to scientific evaluation to determine its impact on patient outcomes.

Conduct task analyses to determine appropriate staff configurations during secondary patient-transfers.

Conduct EMS occupational health research.

How-tos (strategies)

EMS Education programs/*Who* will include research related objectives in the education processes of EMS providers and managers by *date*

Who will interpret informed consent rules to allow for the clinical and environmental circumstances inherent in conducting credible EMS research by **date**

GETAC will encourage advanced college-based EMS education programs to conduct EMS research (i.e. Skill degradation) by **date**

Information Systems (F. E. Shaheen) (insert description from Lee Sweeten's document)

Objectives (by 2010):

Adopt uniform data elements and definitions and incorporate them into information systems.

Develop and maintain information systems to generate and transmit data that are valid, reliable, accurate, and secure.

Develop and maintain information systems that are able to track an entire patient encounter.

Develop integrated information and reporting systems with other health care providers, public safety agencies, and community resources that minimize redundancy.

Improve the ability of EMS to document injury and illness circumstances.

Develop information systems that provide linkage between various public safety services and other health care providers.

How-tos (strategies)

TDH EPI will adopt uniform data elements and definitions and incorporate them into information systems by **date**

EMS providers and hospitals will develop mechanisms to generate and transmit data that are valid, reliable, and accurate by **date**

TDH will develop information systems that are able to describe an entire EMS event by **date**

TDH and RACs will provide feedback to those who generate data by **date**

Texas will adequately fund the state emergency and trauma care data infrastructure.

Evaluation (Pete Wolf) (insert description from Lee Sweeten's document)

Objectives (by 2010):

Develop systems to evaluate the effectiveness of EMS and trauma care systems at the local, regional, and state level.

Assess the effectiveness of various personnel and resource attributes for EMS dispatching.

Evaluate and employ technologies that attenuate potential barriers to EMS access.

How-tos (strategies)

Develop valid models for EMS evaluations

Evaluate EMS effects for multiple medical conditions

Determine EMS effects for multiple outcome- categories

Determine EMS cost-effectiveness

Incorporate consumer input in evaluation processes

Legislation & Regulatory (Arlene Marshall) (insert description from Lee Sweeten's document)

Objectives (by 2010):

Increase funding for Bureau of EMS.

Pass and periodically review enabling legislation that supports innovation and integration of EMS and trauma services.

Establish EMS and trauma service as an essential service (public safety model). (everybody has access)

Explore initiatives to address emergency health care liability issues.

How-tos (strategies)

Enhance abilities to provide technical assistance

Develop a system for reciprocity of EMS provider credentials.

Texas will adopt legislation that mandates EMS as an "Essential Service".

System Finance (Gary Cheek) (insert description from Lee Sweeten's document)

Objectives (by 2010):

Achieve adequate, long-term, and sustainable funding for local and regional emergency health care services.

How-tos (strategies)

Eliminate patient transport as a criterion for compensating EMS systems.

Appropriate state and regional funds to further develop and update geographically integrated and functionally-based EMS communications networks.

Collaboration with private interests to effect shared purchasing of communication technology.

Allocate federal and state funds for a major EMS systems research thrust.

Utilize state police to provide 1st responder activities for uncovered areas.

Multi-disciplinary funding initiative – source: motor vehicle registration fees (EMS/TS coalition to meet)

Fees should go to TDH.

CONCLUSION

REFERENCES

Texas Health and Safety Code – Chapter 773

(<http://www.capitol.state.tx.us/statutes/he/he0077300toc.html>)

EMS Agenda for the Future (<http://www.nhtsa.dot.gov/people/injury/ems/agenda/>)

Trauma Systems Agenda for the Future

EMS Research Agenda for the Future?

Iowa's EMS Agenda for the Future (http://www.idph.state.ia.us/pa/ems/pdf/ems_agenda.pdf)

California's Emergency Services: A System in Crisis (<http://www.cmanet.org/upload/ERWhitePaper.pdf>)

GLOSSARY

Advanced Life Support (ALS)

Basic Life Support (BLS)

Bureau of Emergency Management (BEM)

Bureau of Epidemiology (EPI)

Designation

Emergency Medical Dispatch (EMD)

Emergency Medical Services (EMS)

EMS Provider

Emergency Medical Services and Trauma Systems

Emergency Medical Technician-Basic (EMT-B)

Emergency Medical Technician-Intermediate (EMT-I)

Emergency Medical Technician-Paramedic (EMT-P)

First Responder Organization (FRO)

Governor's EMS and Trauma Advisory Council (GETAC) – created by 76th legislature

Licensed Paramedic (LP)

Medical Direction

MICU

Specialty Care Transport

Transport

Transfer

Trauma

APPENDICES

Survey summaries

Public Hearings summary

Diversion Task Force report

History of Texas EMS and Trauma Systems

GETAC members list

TDH Bureau of Epidemiology information (<http://www.tdh.state.tx.us/injury/reports/strat1/>)

Texas Statutes related to EMS and Trauma Systems